



A152.E1428
JACC March 9, 2010
Volume 55, issue 10A



VALVULAR HEART DISEASE

MEASUREMENT OF CARDIAC FUNCTION USING PRESSURE-VOLUME CONDUCTANCE CATHETER TECHNIQUE IN A NEW RAT MODEL OF CHRONIC MITRAL REGURGITATION

ACC Poster Contributions

Georgia World Congress Center, Hall B5

Tuesday, March 16, 2010, 9:30 a.m.-10:30 a.m.

Session Title: Early Detection of Valvular Disease

Abstract Category: Valvular Disease

Presentation Number: 1279-381

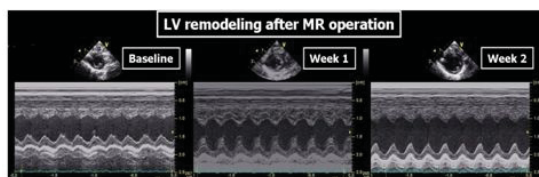
Authors: *Kyong-Hee Kim, Yong-Jin Kim, Hyung-Kwan Kim, Dae-Won Sohn, Byung-Hee Oh, Young-Bae Park, Seoul national university hospital, Seoul, South Korea*

Objectives: The aims of this study were to develop a new animal model of chronic mitral regurgitation and to measure cardiac function using pressure-volume conductance catheter technique in a new animal model of chronic mitral regurgitation (MR) in rats.

Method: MR was created by following method. Left thoracotomy was performed in 36 Sprague-Dawley (SD) rats. A fine needle (0.45mm diameter) was introduced through LV apex under the guidance of transesophageal echocardiography and made a hole on mitral leaflet. MR was considered significant if a regurgitant jet area occupied more than 45% of the left atrium. Serial echocardiographic exams and swimming test for evaluating exercise capacity were performed at 2-week intervals. Hemodynamic analysis was done at 14 weeks after MR formation.

Results: Echocardiographic parameters and exercise capacity were significantly different between MR group (n;18) and control group (n;18). Left ventricular dilatation and exercise intolerance were developed in MR group (LV end-systolic dimension at 14 weeks, 4.3 ± 0.2 vs 5.5 ± 0.4 mm for control vs. MR, $P < 0.01$; LV end-diastolic dimension, 7.6 ± 0.1 vs 8.6 ± 0.2 ; swimming duration, 465 vs 427 seconds, $p < 0.001$). In hemodynamic analysis, LV end systolic volume and the EDPVR slope were greater in MR group than in control group.

Conclusion: We successfully set up a rat model of significant MR and evaluate cardiac function using pressure-volume conductance catheter.



Hemodynamic parameters measured by the Pressure-Volume conductance catheter system⁴²

	Control	MR	P value
HR, beats/min	333±42	346±71	0.93
ESV, μ l	105.0±38.2 _a	218.0±64.3 _b	< 0.01
ESV/Bwt, μ l/g	0.19±0.08 _a	0.38±0.09 _b	< 0.01
EDV, μ l	327.8±77.0 _a	436.0±22.6 _b	< 0.01
EDV/Bwt, μ l/g	0.57±0.18 _a	0.77±0.04 _b	< 0.01
EF, %	69.5±4.0 _a	61.7±3.5 _b	< 0.01
SV, μ l	232.3±38.1	298.0±107.4	0.47
SV/Bwt, μ l/g	0.40±0.09	0.52±0.15	0.21
LV ESP, mmHg	92.3±6.5 _a	96.9±6.3 _a	< 0.01
LV EDP, mmHg	33.5±2.0	31.6±3.3	0.53
Cardiac output, ml/min	78.6±6.3	96.5±1.4	0.37
+dP/dt, mmHg/s	5124.0±1466.9	4847.3±1304.7	0.69
-dP/dt, mmHg/s	-3781.3±722.0	-3942.9±631.9	0.07
τ (Weiss), ms	18.8±8.5	15.9±3.8	0.65
ESPVR, mmHg/dl	36.1±13.3	33.1±19.9	0.76
EDPVR, mmHg/dl	0.4±0.4 _a	1.4±0.5 _b	< 0.01